Welcome 2015!

We hope all of you had an opportunity to spend time with family and friends over the holidays and are returning to work with positive goals and resolutions for the New Year.

While nurses at St Joseph’s had much to celebrate in 2014 we have also had to cope with continuing change in healthcare. Whether you are new to nursing or a seasoned professional or somewhere in-between, change is never easy. Many of us, at times, feel weary that the hard work we are putting in is not worthwhile; that we are not succeeding.

A recent email from a local healthcare group titled “Congratulations to Us” gave a different perspective to trying and not succeeding. The group was awarded “The Man in the Arena” award for trying to achieve a worthy goal but failing. The award is based on a speech by Theodore Roosevelt (paraphrased for nurses):

> It is not the critic who counts, not the one who points out how the strong nurse stumbles, or where the doer of deeds could have done them better. The credit belongs to the nurse who is actually in the arena, whose face is marred by dust and sweat and blood; who strives valiantly; who errs, who comes short again and again, because there is no effort without error and shortcoming; but who does actually strive to do the deeds; who knows great enthusiasm, the great devotions; who spends himself in a worthy cause; who at the best knows in the end the triumph of high achievement, and who at the worst, if he fails, at least fails while daring greatly, so that his place shall never be with those cold and timid souls who neither know victory nor defeat.

Are you a nurse in the arena? What are you striving for? What can you do to improve the health of your patients, peers, community? Maybe it’s big; maybe it’s small; maybe you’ll succeed; maybe you’ll fail but nothing will happen until you try. Join us in the arena as we move from good to great to stellar.

Beth and Cyndi
Graduations & Certifications:

Natalie Berakovich RN, Medical Telemetry, earned a BSN from CSUF
Magdalena Chavez RN, CNII, Main PACU, earned a BSN from CSUF
Ann Marie Schultz RN, CNII, Surgery Center-Outpatient, passed the Certification Exam for OR Nurses (CNOR)
Emily Bonneville RN, MICU, passed the CCRN
Inez White, RN, MSN, CN III received her Master’s Degree in Nursing with a specialty in Community Health from California State University, San Bernardino
Sona Palmer, RN, MSN, CEN, Clinical Coordinator in the Emergency Care Center received her MSN from Chamberlain University
Jennifer Bledsoe, RN, BSN, CEN, CN II received her BSN from Chamberlain University

Annual Dysrhythmia Competency for RNs and Non-RNs

• Does your job require Basic Dysrhythmia Interpretation?
  • If yes...
    • The Annual Dysrhythmia Competency will be added to your HealthStream assignments by April 1st.
    • Due date is April 30, 2015
    • Review resources are available on Staff Hub using “Basic Dysrhythmia” as search term.
Nurse Week 2015 Award Nominations

Which one of your peers, co-workers and/or leaders would you nominate for...

Exemplary Professional Practice (Nursing Professional Practice)
This award recognizes nurses that demonstrate interdisciplinary collaboration and build collegial working relationships while promoting a culture of safety utilizing research and quality improvements results to improve nursing care.

New Knowledge, Innovations & Improvements (Evidence Based Nursing Practice)
This award recognizes nurses that integrate evidence based practice to improve clinical and operational outcomes. This nurse embraces technology and is a role model for innovation and resourcefulness.

Structural Empowerment (Advancing the Profession of Nursing)
This award recognizes nurses who promote relationships with community organizations that improve patient outcomes. This nurse is involved in professional organizations to advance the profession of nursing and support lifelong learning through career advancement, precepting and mentoring.

Transformational Leadership (Nursing Leadership)
This award recognizes Executive Directors, Managers, Clinical Coordinators, Advanced Practice Nurses and extended role RNs who serve as role models by demonstrating clinical leadership. Transformational leaders demonstrate active committee membership, project development, clinical expertise and focus on improving patient outcomes.

Nursing Assistant Excellence
This award recognizes the major contribution of our nursing assistants and patient care technicians to the overall success of patient care within our organization.

Detailed information will be published soon for the nomination process and filing dates.
The other day I had a patient with no arms and legs. I had been taking care of psychiatric patients all day. When I met Mr K, I already had 3 patients who presented themselves as helpless and hopeless. One was an alcoholic whose husband was leaving her and taking the children because she refused to enter detox for the 5th time. My second patient was a methamphetamine addict who was using more and more meth to try and quiet the voices in his head, and the third, a young man who went out drinking 2 nights ago, passed out and thinks he was raped. He also claims his father beat him, so we were waiting for the police to come and take a report. And these were just my present patients. I had been dealing with these types of issues all morning and was starting to feel helpless and hopeless myself.

When the triage nurse told me they put Mr K in my room, I felt almost angry. I was so busy with my psych patients, how was I going to find time to take care of him. He had no arms and legs, a fever of 102, no spleen, a kidney transplant and would therefore need a full septic work up. This includes starting an IV and drawing blood cultures from 2 separate sites. How was I supposed to do this with a patient with no arms and legs? I was ranting and raving inside.

Then I met Mr K. He is a 21 year old true gentleman. As soon as I saw his smiling face and sparkling eyes, I was immediately calmer. It was true that he only had short stubs where his arms and legs should be, but he didn’t seem to care. I asked him where he usually got his blood drawn and he showed me. He preferred his right arm since he had more movement in his left arm. I tried to accommodate his request. He was very patient with me and his difficult IV start but we were successful on the second attempt. Then he needed a 2nd blood culture drawn. I asked a fellow nurse to help me as I was already feeling lucky for getting the first.

After drawing his blood and starting his IV, Mr K asked if he could go to the bathroom. “Poop or Pee?” I asked. “Number 2” he responded. How was he going to go? All he needed were some booties for his feet. What? He had no feet. Somehow he was able to walk on his stumps as if it were the most normal thing in the world. Then he asked for some water. How was he going to drink? With a cup and straw, silly!!! Yes, he was able to hold the cup steady between his stumpy arms.

I was so humbled with the privilege of meeting Mr K. Even though he had lost the majority of his arms and legs at 9 months of age from pneumococcal meningitis, he acted as if it was completely normal. There was not an ounce of hopelessness or helplessness in his body. His dignity somehow remained intact. So I quickly forgot his disability and hope I treated him the same as all of my other patients.

My only angst is that he will never be able to be a nurse, work with me and love his job as much as I do. Due to his limited coordination and only stubs for thumbs, any job that required fine motor coordination would be very difficult for him. Notice I didn’t say impossible, because I believe Mr K could do anything that he set his mind to.
Caritas in Action as Reflected in Christine’s Narrative

Christine used Caritas Process Four: Developing and Sustaining a Helping-Trustina Caring Relationship to enter into a Transpersonal Caring Relationship with Mr. K. Jean Watson in Nursing: The Philosophy and Science of Caring writes:

Such an authentic spirit-to-spirit connection in a given moment transcends the personal ego level of professional control and opens the nurse’s intelligent heart and head to what is really emerging and presenting itself in the now-moment. The transpersonal Caritas Consciousness nurse is more open, responsive, and sensitive to what is occurring—more able to “read the field”, to pick up subtleties in the field, to use all resources and draw upon all ways of knowing: empirical-technical, ethical, intuitive, personal, aesthetic, even spiritual knowing.

This ability to be present-in-the-now, doesn’t keep the nurse from performing necessary tasks or procedures. Instead, in some instances it reduces the demands of care. The nurse is able to offer care that is more focused, more accurate, more appropriate, and generally more fulfilling for both the nurse and the patient. Christine shared, “I truly believe he was able to help me more than I helped him. I felt authentically present the entire time, a true “Jean Watson Sacred Encounter.

St. Joseph Hospital will be using a new Advanced Health Care Directive: “5 Wishes”

It covers medical care wishes and surrogate decision-maker, as well as other considerations at the end of life.

5 Wishes is not about how to die, it is about how you want to live the last part of your life. It is written clearly and is easy to understand.

The 5 wishes are:

- The person I want to make care decisions for me when I can’t
- The kind of medical treatment I want or don’t want
- How comfortable I want to be
- How I want people to treat me
- What I want my loved ones to know
DEPRESSION

EPIDEMIOLOGY
* 6.7% of adult population
* 14.8 million American adults
* Leading cause of disability in the U.S. ages 15-44

SIGNS & SYMPTOMS
Persistent sad or empty feelings
Feelings of hopelessness or helplessness
Feelings of guilt or worthlessness
Loss of interest in activities or hobbies once pleasurable
Fatigue or decreased energy
Distractibility, difficulty concentrating, remembering
Insomnia, early-morning wakefulness, or excessive sleep
Overeating, or appetite loss
Thoughts of suicide, or suicide attempts

MEDICATIONS
Antidepressants – Selective Serotonin Reuptake Inhibitors
There are many choices but the following are the most popular
Prozac (fluoxetine) 20-80 mgs per day; initial 20 mgs/day
Zoloft (sertraline) 50-200 mgs per day; initial 50 mgs/day
Celexa (citalopram) 20-60 mgs per day; initial 20 mgs/day
Paxil (paroxetine) 20-50 mgs per day; initial 20 mgs/day

NURSING INTERVENTIONS

TIME
Slow down
Assess the problem
Watch for signs & symptoms
Give the person time to “hear” you

ATMOSPHERE
Reduce distractions
Keep environment calm
Maintain personal space
Move slowly
Offer distractions – snacks, warm blanket, TV

COMMUNICATION
Speak calmly
Focus on behaviors
Help them focus on your voice
Make expectations clear

TONE
Be non-confrontational
Be respectful and reassuring
Be truthful
Q: Why does St. Joseph RT and RNs still lavage ET tubes with normal saline when evidence-based practice research shows this is not helpful and potentially harmful?

A: According to Lippincott's Nursing Procedures, the use of normal saline is not included in the guidelines for suctioning. Current research is not clear. A recent study indicates that not using normal saline before endotracheal suction decreases the incidence of ventilator-associated pneumonia and associated medical costs (Mei-Yu, Shu-Hua, & Yi-Hui, 2012). This is contradicted by findings from another recent study which found that instillation of normal saline decreased incidence of pneumonia in intubated and ventilated patients (Caruso, Denari, Ruiz, Demarzo, & Deheinzelin, 2009). One possible explanation for the discrepancy in results is from variations in the administration of the normal saline, time to suctioning, patient position, and dosages of saline.

Until more definitive evidence is produced, SJO will continue to follow recommendations from the Lippincott Nursing Procedure Manual.

Response written by Kathleen Pentecost, SRN CBU, BA Sociology & Carla I. Morales, SRN CBU, BS Psychobiology


New Electronic Books added to our Catalog

We are happy to announce the addition of over 1,200 e-books to our library catalog CyBurCat. The books are available through our subscription to Clinical Key and cover a wide variety of clinical and educational topics. Check out these new titles by visiting www.BurlewMedicalLibrary.org, click on the CyBurCat link and conduct a keyword search. Or you can visit www.ClinicalKey.com while on campus and browse the available book titles.

Contact Danielle Linden at ext 17759 or danielle.linden@stjoe.org for more information

New Print Book List

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<tr>
<td>Health promotion in nursing practice Murdaugh, Carolyn L. 2014</td>
<td>Person and family centered care Barnsteiner, Jane 2014</td>
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<tr>
<td>The clinical practice of neurological and neurosurgical nursing Joanne V. Hickey 2014</td>
<td>AACN essentials of critical care nursing Burns, Suzanne M. 2014</td>
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<td>Quantum leadership : building better partnerships for sustainable Health Tim Porter-O'Grady and Kathy Malloch. 2014</td>
<td>Essentials of clinical geriatrics Robert L. Kane 2014</td>
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<td>Care coordination and transition management core curriculum Haas, Sheila A. 2014</td>
<td>Statistics for advanced practice nurses and health professionals Donjje, Katherine J. 2014</td>
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<tr>
<td>Core curriculum for vascular nursing Christensen, Cynthia 2014</td>
<td>Radiologic and imaging nursing : scope and standards of practice 2014</td>
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<td>Care coordination : the game changer : how nursing is revolutionizing quality care Lamb, Gerri,. 2014</td>
<td>Basics of the U.S. health care system Nancy J. Niles 2014</td>
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<td>Neonatal nursing : scope and standards of practice 2013</td>
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## Computer Class Schedule for February & March

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<tr>
<th>Course</th>
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<tr>
<td>Access Queries</td>
<td>March 6; 8:30-12</td>
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<tr>
<td>Access Forms and Reports</td>
<td>March 27; 8:30-12</td>
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<tr>
<td>Excel Intermediate</td>
<td>February 11; 8:30-12</td>
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<tr>
<td>PowerPoint: Introduction</td>
<td>March 19; 8:30-12</td>
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<tr>
<td>Publisher</td>
<td>February 20; 8:30-12</td>
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<tr>
<td>Outlook 2010 New Features</td>
<td>March 13; 9-11am</td>
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<tr>
<td>Word Intermediate</td>
<td>March 5; 8:30-12</td>
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The classes are free for SJO employees. Please register for the Computer Classes on HealthStream. The classes are currently open to all ministries for a fee of $75/class. Please contact Phyllis Sharum, x17435, for any questions or registration forms. Phyllis.Sharum@stjoe.org

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*The whole purpose of education is to turn mirrors into windows.*

*Sydney J. Harris*